

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-375)							SERIAL NO. 097830434		FILING DATE 26 APR 2007		
							APPLICANT(S) K. Hayashi				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1			1				51				
2							52				
3							53				
4							54				
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42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.			1				TOTAL IND.				
TOTAL DEP.							TOTAL DEP.				
TOTAL CLAIMS			1				TOTAL CLAIMS				